

DISTRIBUTION		
SANTA FE		
FILE		
J.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	1
OPERATOR		3
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
Caulkins Oil Company
Address
P.O. Box 780 Farmington, New Mexico
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Commingle Pictured Cliffs and Chacra
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE
Lease Name Breech Well No. 258 Pool Name, including Formation Otero-Chacra & South Blanco Kind of Lease State, Federal or Fee Fed. Lease No. NM 03733
Location
Unit Letter F ; 1450 Feet From The North Line and 1850 Feet From The West
Line of Section 18 Township 26 N Range 6 W , NMPM, Rio Arriba County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
Gas Company of New Mexico 1508 Pacific Ave, Dallas, Texas
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
yes 3-29-78
If this production is commingled with that from any other lease or pool, give commingling order number: R-5648

IV. COMPLETION DATA
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded 6-29-76 Date Compl. Ready to Prod. 3-22-78 Total Depth 3480 P.B.T.D. 3480
Elevations (DF, RKB, RT, GR, etc.) 6204 GR Name of Producing Formation Chacra & Pictured Cliffs Top Oil/Gas Pay 2478 Tubing Depth 3380
Perforations 2480, 2488, 2502, 2516, 2514-2522, 3368-3384 Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
12 1/4" 8 5/8" 174 185
7 7/8" 4 1/2" 3480 524
1" 3380

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil-Bbls. Water-Bbls. Gas-MCF

GAS WELL
Actual Prod. Test-MCF/D 221 Length of Test 24 hrs Bbls. Condensate/MMCF Gravity of Condensate
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size
Turned on line to Gas Company of New Mexico 3-30-78

VI. CERTIFICATE OF COMPLIANCE
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.
Signature: Dwayne Blawett (Signature)
Title: Prod. Foreman (Title)
Date: 4-18-78 (Date)
OIL CONSERVATION COMMISSION
APPROVED _____, 19____
BY: Original Signed by A. R. Kendrick
TITLE _____
This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple